USQ
AUSTRALIA

University of Southern Queensland

USQ Contractor Questionnaire

Version 2.1
Dec 2011

Part A - To be completed by the Organisation contracting with USQ *(please complete ALL items)*:			
1.	**Legal Name** of Contractor Organisation:……..……..……... **Trading Name** of the Contractor Organisation (*if applicable*):…….. **ABN** of Contractor Organisation:….……..…… Please circle your **entity type**: *Sole Trader / Company / Trust / Partnership / Other* ***If entity type is "Trust", please provide the name of the Trustee***……..…….… Is Contractor Organisation registered for **GST**? *Yes / No* *(Where the contractor has no ABN, generally the payment will be made to the person via the HR- Pay Office.)*		
2.	Please describe the type of professional service that you will be providing to USQ under this proposed contract: ……..……. *(A **contract** is a business or legal engagement and includes any arrangement between parties to perform services).*		
3.	With regard to the type of professional service described at *Item 2*, will you be engaging any other person/s to perform all or part of the work required for this service? ***Yes / No*** If "***yes***":- • How many additional persons will you be engaging?..... • Will any of these persons be named individually in the contract or in the schedule to the contract? *Yes / No* • How many of these persons will be classified as "employees" for the purposes of payroll tax?.....		
4.	Is your organisation either a *recruitment agency* or an *employment agency*? ***Yes / No*** If **"yes":-** Will your organisation pay the worker providing the professional services directly? *Yes / No*		
5.	During the financial year approximately what percentage of your total revenue is, or will be, sourced from this University? .....%		
6.	Do you hold a current statutory workers' compensation & rehabilitation insurance policy? *Please note that you may be asked to supply a current Certificate of Currency for this cover.*	Yes	No
7.	Do you have current Public Liability Insurance? Limit $..... *Please note that you may be asked to supply a current Certificate of Currency for this cover.*	Yes	No
8.	Do you have current Professional Indemnity Insurance? Limit $..... *Please note that you may be asked to supply a current Certificate of Currency for this cover.*	Yes	No
9.	Do you regularly provide the type of professional services described at *Item 2* to principals other than this University (for example, to the general public)?	Yes	No
10.	Do you hold a *Personal Services Business Determination* from the ATO (Taxation Office)?	Yes	No
11.	Will your organisation supply all of the necessary transport, tools, equipment and office space required in the performance of this professional service contract or engagement? If ***"yes"***, please indicate below extent of this supply:- ☐ *Home Office, including computer* ☐ *Truck/ Utility - 1 tonne or more capacity* ☐ *Shop Front (eg sales)* ☐ *Utility up to 1 tonne capacity* ☐ *Workshop or Shed* ☐ *Van/Panel Van* ☐ *Other Venue* ☐ *Other Vehicle (please describe below)...* ☐ *Business Equipment Value < $20,000* …… ☐ *Business Equipment Value > $20,000*	Yes	No
12.	Will you bear any commercial risk in respect of providing these services to the University?	Yes	No

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13.	Do you advertise your services to the general public or to a particular class of persons (such as government agencies, universities, construction companies etc)? ***If "yes" what media do you use? yellow pages / internet / other?***.....	Yes	No
14.	Will you be invoicing USQ using piecemeal rates eg either hourly, daily or weekly rates?	Yes	No
15.	Will you be invoicing USQ in the form of a fixed fee for the work performed or, if progressive payments are required, will these be based on completed tasks or contract milestones?	Yes	No
16.	Does your organisation have business premises that are physically separate from any personal residence and from any premises belonging to your clients?	Yes	No
17.	Will you be providing services to USQ for more than 90 days in aggregate during the financial year (where *any* time worked in a 24 hour period is counted as one day)?	Yes	No
18.	Is the object of your contract to achieve a specified result or outcome (that is, the contracted result must be produced or achieved before any payment is made)?	Yes	No
19.	Would your organisation be liable for the cost of rectifying any defect in the professional services performed under this contract or engagement?	Yes	No
20.	Are the tasks specified under the contract being performed on USQ's premises?	Yes	No
21.	Will you be required to work fixed or regular hours set by USQ?	Yes	No
22.	***Only*** complete this question if you operate as an ***individual*** or ***sole trader***? • What ***proportion*** of the total contract is for ***labour only***?.....% • Are you aged between 18 years and 70 years of age?..... If ***proportion*** is 50% or more & your age is between 18 & 70 years of age then USQ has an obligation to pay superannuation guarantee on your behalf. Please complete the following:- Contractor's Superannuation Fund Name:-…… Contractor's Superannuation Fund Address:-…… Superannuation Fund Number:-……. Contractor's Member Account Number:-…….. Contractor's Date of Birth:-…… • ***Please note that this must be a registered superannuation fund which is able to accept the Superannuation Guarantee payment as required under the legislation.*** • ***Where insufficient details are provided, payment may be made to a default super fund.***	Yes	No
23.	X……..……..……Date:……..…..……. Signature of Authorised Person ……...……..…….……..……. Name of Authorised Person (*please print*) Position *(please print)* Business Address:……Postal Address:…….…….. Business Email:……..…Phone:…….…….……..		

Privacy Statement

USQ is collecting personal information on this form for the University purpose of providing tertiary education, related ancillary services and associated functions. This includes enabling USQ to correctly self-assess and comply with payroll tax, superannuation, workers compensation and other legislation including: Payroll Tax Act 1971 (Qld); Superannuation Guarantee (Administration) Act 1992 (Cwlth); Fringe Benefits Tax Assessment Act 1986 (Cwlth); Income Tax Assessment Act 1997 (Cwlth); Workers' Compensation and Rehabilitation Act 2003 (Qld). USQ may be required to provide some or all of this information to the Office of State Revenue, the Australian Taxation Office, your superannuation provider, and the relevant workers' compensation authority. Your personal information will not be disclosed to any other third party without your consent unless required or authorised to do so by law as per Information Privacy Act 2009 (Qld).